

STATE OF WASHINGTON APPLICATION FOR CHANGE/TRANSFER

OF WATER RIGHT

For filing with Ecology or with County Conservancy Boards



A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

| (Check all that apply.) ☐ Change purpose(s) of use ☐ Add purpose(s) of use ☐ Change point(s) of diversion/withdrawal ☐ Add point(s) of diversion/withdrawal ☐ Change/transfer place of use ☐ Other (i.e. consolidation, intertie, trust water) Explain: **IF MORE SPACE IS NEEDED, ATTACH ADD | F | CHANGE No. <u>C64-25</u> DATE ACCEPTED OF EE \$ 20 FR CHECK No. 3292 SEPA: Exempt | □ Not exempt |
|--|----------------|---|--------------|
| 1. Applicant Information: | | | |
| APPLICANT/BUSINESS NAME | | PHONE NO. | FAX NO. |
| Van Newton | | (509) 476- | 3883() |
| ADDRESS | | | |
| CITY 2 hoomes droville Rd. | | STATE | ZIP CODE |
| CITY Loomis, Wa. 98827 | | JULIE | 211 0002 |
| | | | |
| CONTACT NAME (IF DIFFERENT FROM ABOVE) | | PHONE NO. | FAX NO. |
| Same | | () | () |
| ADDRESS | | | |
| CITY | | STATE | ZIP CODE |
| CITT | | SIAIE | ZIP CODE |
| 2. Water Right Information: WATER RIGHT OR CLAIM NUMBER G4-25723 C DO YOU OWN THE RIGHT TO BE CHANGED? YES INO | RECORDED | NAME(S) | |
| IF NO, PROVIDE OWNER(S) NAME: | | | |
| HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST F | FIVE (5) YEARS | S? ☑YES ☐ NO | |
| Please attach copies of any documentation that denwas established. Also, if you have a water system papplication. | | | |
| FOR OFFI | CE USE ON | LY | |
| APP. NO PERMIT NO CER | RT. NO | CERT. OF C | HANGE NO |
| | | | |

C64-25723C

3. Point(s) of Diversion/Withdrawal:

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|----|------|------|
| Α. | Exis | TIMA |
| M. | LVIS | ung |

| SOURCE | NO. | 1/4 | 1/4 | SEC. | TWP. | RGE. | PARCEL# | WELL TAG # |
|--------|-----|-----|-----|------|------|------|------------|------------|
| Hell | | SW | SE | 5 | 40 N | 26 | 4026050002 | ACN-031 |

B. Proposed

| SOURCE | NO. | 1/4 | 1/4 | SEC. | TWP. | RGE. | PARCEL# | WELL TAG # |
|--------|-----|-----|-----|------|------|------|------------|------------|
| Thell | | SE | NW | 12 | 40 | 25 | 4025120015 | NA |

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☑ YES ☐ NO PROPOSED: ፫ YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

Frieting

| PURPOSE OF USE | GPM or CFS | ACRE-FT/YR | PERIOD OF USE |
|--|------------|------------|---------------|
| Irrigation | 709pm | 28 | 4-1 to 10-1 |
| 0 | | | , |
| Carrier Control Contro | | | |
| | | | |

B. Proposed

| PURPOSE OF USE | GPM or CFS | ACRE-FT/YR | PERIOD OF USE |
|----------------|------------|------------|---------------|
| Drigation | 70 9PM | 28 | 4-1 to 10-1 |
| 0 | | | |
| | | | |
| | | | |
| | | | |

5. Place of Use:

| | | LE | GAL DESCR | RIPTION OF | LANDS WHERE WATER IS | PRESENTLY USED: | *************************************** |
|-----|-------------|------|-----------|------------|----------------------|-----------------|---|
| | | | | | | | |
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| | | - | | | | | |
| | | 050 | | 505 | COUNTY | DAROSI # | # OF A CRES |
| 1/4 | 1/4 | SEC. | TWP. | RGE. | COUNTY | PARCEL# | # OF ACRES |

B. Proposed

| | | L | EGAL DES | CRIPTION | OF LANDS WHERE NEW USE | IS PROPOSED: | |
|-----|-----|------|----------|----------|------------------------|--------------|------------|
| | | | | | | | |
| | | | | | | | |
| 1/4 | 1/4 | SEC. | TWP. | RGE. | COUNTY | PARCEL# | # OF ACRES |

-2-

3. Point(s) of Diversion/Withdrawal:

A. Existing

| SOURCE | NO. | 1/4 | 1/4 | SEC. | TWP. | RGE. | PARCEL# | WELL TAG # |
|--------|-----|-----|-----|------|------|------|------------|------------|
| Hell | | SW | SE | 5 | 40 N | 26 | 4026050002 | ACN-031 |
| | | 100 | | | | | | |

B. Proposed

| SOURCE | NO. | 1/4 | 1/4 | SEC. | TWP. | RGE. | PARCEL# | WELL TAG # |
|--------|-----|-----|-----|------|------|------|--|------------|
| Thell | | SE | NW | 12 | 40 | 25 | 4025120015 | NA |
| 700 | | | | | , , | | 75 75 75 75 75 75 75 75 75 75 75 75 75 7 | |

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: X YES I NO

PROPOSED:

▼YES □ NO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A Fxisting

| Irrigation | 709pm | 10 | + |
|------------|-------|----|-------------|
| | 10/20 | 28 | 4-1 to 10-1 |
| - | | | |
| | | | |

B. Proposed

| PURPOSE OF USE | GPM or CFS | ACRE-FT/YR | PERIOD OF USE |
|----------------|------------|------------|---------------|
| Drigation | 709Pm | 28 | 4-1 to 10-1 |
| | | | |
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| | | | |

5. Place of Use:

A Existing

| | | LE | GAL DESCR | RIPTION OF | LANDS WHERE WATER IS | PRESENTLY USED: | |
|------|-----|------|-----------|------------|----------------------|-----------------|------------|
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| | | 4 | | | | | |
| . 19 | | | | | | | 23.1 |
| | | | | | **** | | |
| 1/4 | 1/4 | SEC. | TWP. | RGE. | COUNTY | PARCEL# | # OF ACRES |
| SW | SE | 5 | 40 | 26 | Ohanogan | 4026050002 | 7 |

B. Proposed

| | LEG | AL DES | SCRIPTION C | OF LANDS WHERE NEW USE | IS PROPOSED: | |
|------------|-----------|--------|-------------|------------------------|---------------------|--------------------------------|
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| SE | C. 1 | TWP. | RGE. | COUNTY | PARCEL# | # OF ACRES |
| W 1 | 2 4 | 40 | 25 | Ohanogan | 4025120015 | 7 |
| L THE LAND | OS IN THE | PROP | OSED PLACE | | | NAME: |
| - | N I | N 12 | N 12 40 | N 12 40 25 | N 12 40 25 Ohanogan | N 12 40 25 Ohanogan 4025120015 |

Emergency Qrought

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

UNDER NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

| 6. Remarks and | d Other Relevant Information: | | |
|----------------------------------|--|---|--------------------|
| water | to jacres of non int | | |
| two p | arcels of property I ow | rld o | |
| | | | |
| | | | |
| IF FOR SEASONAL OR T | TEMPORARY, START DATE 4,15,01 END D | DATE 101 151 01 | |
| 7 0: | | | |
| 7. Signatures: | | | |
| order to proces Conservancy B | e information above is true and accurate to its my application, I am hereby granting stop or inspections to the above site (s) for inspective above application, I understand that a | aff from the Department of Ecology or the tion and monitoring purposes. If assisted | County l in the |
| | | | |
| | San newton (Applicant) | <u>4 19 01</u> (Date) | |
| | | | |
| | Dan newton | 4 119 101 | |
| | (Water Right Holder) | (Date) | |
| | | | |
| | Dan nawton | 4/19/01 | |

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

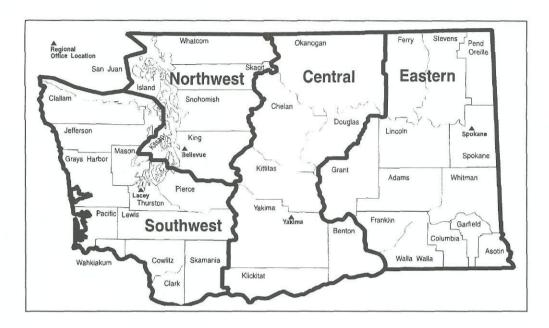
(Land Owner(s) of Existing Place of Use)

| WE ARE RETURNING YOUR APPLICATION | N FOR THE FOLLOWING I | REASON(S): |
|-----------------------------------|-----------------------|---------------|
| ☐ APPLICATION FEE NOT ENCLOSED | ☐ MAP NOT INCLUDED | or INCOMPLETE |
| ☐ ADDITIONAL SIGNATURES REQUIRED | □ SECTION | IS INCOMPLETE |
| OTHER/EXPLANATION: | | |
| STAFF: | DATE: | / |
| | | |

C64-25723C

IMPORTANT!

Submit your application to Ecology at the regional office for the area of proposed or existing water use or at a Conservancy Board with jurisdiction. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application or whether a County Conservancy Board with jurisdiction exists, contact the Water Resources program at the regional office in which your project is located.



Department of Ecology Central Regional Office 15 W. Yakima Avenue, Suite 200 Yakima, WA 98902 Telephone: (509) 575-2490

Department of Ecology Northwest Regional Office 3190 – 160th Avenue SE Bellevue, WA 98008-5452 Telephone: (425) 649-7000 Department of Ecology Eastern Regional Office N. 4601 Monroe, Suite 202 Spokane, WA 99205-1295 Telephone: (509) 456-2926

Department of Ecology Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 Telephone: (360) 407-6300

Persons of disability needing assistance in the application process or those needing this application in an alternate format, may call (360) 407-6607 (voice) or (360) 407-6006 (TDD).

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